

Reviewer:
Date Reviewed:

**NC DHHS
DMH/DD/SAS
Community Support (MH/SA Adults)**

	DESCRIPTION		Conditional Endorsement					Full Endorsement				
	Community Support - Adults	1st=C 2nd=F	Evidence of Compliance	MET	NOT MET	NA		Evidence of Compliance	MET	NOT MET	NA	COMMENTS
	Provider Requirements											
a	**1) Must be delivered by practitioners employed by a mhsa provider organization which meets the standards established by the Division of MHDDSAS. These standards set for the administrative, financial, clinical, quality improvement, and information services infrastructure necessary to provider services.	1st	Provider application with all required supporting documentation completed as required in provider application;					Provider application with all required supporting documentation completed as required in provider application;				
	2) Provider organization must demonstrate they meet these standards by being endorsed by the LME. Within 3 years of enrollment, must have national accreditation	2nd	Program description; Policy & Procedure Manual					Program description; Policy & Procedure Manual				
	**3) The organization must be established as a legally recognized entity in the U.S. & registered to do business as a corporate entity in N.C.	1st 2nd										
	4) CS must have the ability to deliver services in various environments, such as homes, schools, jails (for state funds only), homeless shelters, street locations, etc.	1st 2nd										
b	There is evidence of fidelity to EBP		training plan					training records				
	Staffing Requirements											
a	**Persons who meet the requirements specified for Qualified Professional or Associate Professional status according to 10A NCAC 27.G.0104 may deliver CS. QP are responsible for developing & coordinating the PCP. AP & paraprofessionals may deliver CS services to perform daily case management functions and assist the consumer to develop critical daily living & coping skills.	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files or other documentation that education, experience & training for staff are consistent with requirements and responsibilities.				
b	**1) Paraprofessionals providing CS must be supervised by a qualified professional. 2) Supervision must be provided according to supervision requirements specified in 10A. NCAC 27.G.0104 and according to licensure and certification requirements of the appropriate discipline.	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files; Supervision plans and documentation that supervision requirements are being met.				

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	Staffing Requirements (continued)											
c	Paraprofessional level providers who meet the requirements specified for paraprofessional status may deliver CS services within the requirements of the staff definition specific in the above role. When a paraprofessional provides CS, a QP is responsible for overseeing the development of the consumer's person centered plan.	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files; Supervision plans and documentation that supervision requirements are met.				
d	A certified clinical supervisor (CCS) and certified clinical Addiction Specialist (CCAS) may deliver CS as qualified professionals	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files;				
e	QPs including CCS & CCAS may deliver the following services: coordination & oversight of initial and ongoing assessment activities, initial development & ongoing revision of PC; monitoring of implementation of PCP.	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files and consumer charts to show QP action re PCP				
f	Associate professionals and paraprofessionals may perform the following activities: skill building including daily & community living skills; socialization skills, adaptation skills, development of leisure time interests/activities; symptom management skills; wellness education; education substance abuse; work readiness	1st 2nd	Program description; Personnel Manual; Job descriptions					Personnel files and consumer charts to show AP and Para-prof activities with/for consumer.				
g	1) All staff providing CS to adults must have a minimum of 20 hours of training specific to the required service definition components (including crisis response) within the first 90 days of employment.	2nd	Program description; Personnel Manual; Plan for meeting training requirements					Personnel files and/or other documentation of completion of training requirements.				

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	Service Type / Setting											
a	CS is a direct and indirect periodic service where the CS worker provides direct intervention & arranges, coordinates,& monitors services on behalf of the recipient. Service is provided in any location and may be provided to an individual or a group of individuals.	1st 2nd	program description					program description, PCP, service notes				
b	1) CS provided in range of community settings and can be billed for individuals living in independent living or supervised living (low or moderate). 2) CS also includes telephone time with the individual recipient & collateral contact with persons who assist the recipient in meeting his/her rehabilitation goals. 3) CS activities include person-centered planning meetings & meetings for treatment/service plan development.	1st 2nd	program description,					program description, PCP, service notes, Medicaid RA forms				
	Program/Clinical Requirements											
a	Individuals must receive a minimum of two (2) contacts per month with one (1) contact occurring face-to-face with the recipient.	1st 2nd	program description					PCP, service notes, billing tracking forms,				
b	Contact benchmark shall be measured on an annual basis substantiating sixty percent (60%) or more of CS services delivered face to face with recipients and sixty per cent (60%) or more of staff time must be spent working outside of the facility with or on behalf of the consumers.	1st 2nd	program description					Annual aggregate provider report				
c	1) Caseload size may not exceed 1:30 (one QP worker per 30 clients). 2) group size may not exceed 8 individuals.	1st 2nd	program description					case load assignment, group attendance roster				

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	Program/Clinical Requirements (continued)											
d	<i>**The development, monitoring, and revising of the recipient's person centered plan is the responsibility of the qualified professionals</i>	1st 2nd	Policies and Procedures in place for PCP development that include process for having:. PCP including crisis plan and documentation of PC Planning meetings with consumer participation and input into all decisions.					Policies and Procedures in place for PCP development. PCP in chart. Documentation of PC Planning meetings, with consumer participation and input into all decisions. Service notes document implementation of plan consistent with PCP				
e	<i>**Must have policies and capacity to carry out first responder for their recipients on a face to face basis and also telephonically at all times (24/7/365), with capacity for face-to-face emergency response within 2 hours.</i>	1st 2nd	Policies and Procedures in place for crisis response implementation including: On call scheduling process; process for the on call person to have access to consumer's crisis plan the includes proactive plan (with triggers) and reactive plan (with contacts and phone numbers) and procedures to ensure that crisis plan is followed by provider.					Policies and procedures in place for crisis response. Crisis Plan in chart. Proactive Plan (with triggers) and Reactive Plan (with contacts and phone numbers) included. Service notes document implementation of crisis plan when needed.				

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	Program/Clinical Requirements (continued)											
f	1) Interventions include: identification & interventions to address barriers that impede the development of skills necessary for independent functioning in the community, development & revision of PCP, one-on-one interventions with the community to develop interpersonal & community coping skills, including adaptation to home, school, work environments; therapeutic mentoring; symptom monitoring, monitoring medications & self management of symptoms. 2) Include case management activities as well as assessment & reassessment of need for services.	1st 2nd	program description					PCP, service notes document these activities.				
g	1) CS workers inform & assist, arrange for the recipient to access, and receive benefits and services within the community as well as monitor the provision of those services. 2) CS worker must consult with identified providers, include their input into the service planning process, inform stakeholders, monitor status of the recipient in relationship to the treatment goals. 3) The organization assumes the roles of advocate,	1st 2nd	program description					PCP & service notes document these activities				
	Documentation Requirements											
	Minimum standard is a daily full service note that includes: 1) the purpose of contact, 2) describes the provider's interventions , 3) includes the time spent performing the interventions 4) effectiveness of the intervention, and 5) the signature (degree/credentials or position) of the person providing the service	2nd	Service record; Policy & Procedure Manual					PCP; service notes				